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<b>TRANSMITTAL FORM/EXTENSION REQUEST</b>  <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/736,392	<b>RECEIVED CENTRAL FAX CENTER</b>  <b>JUN 02 2004</b>  <b>OFFICIAL</b>
	Filing Date	12/15/00	
	First Named Inventor	Augenbraun	
	Group Art Unit	2611	
	Examiner Name	Jason Salce	
Total Number of Pages in This Submission	14	Attorney Docket Number	TVG/WGATE5-14

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached  <input checked="" type="checkbox"/> Amendment / Response  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input checked="" type="checkbox"/> Extension of Time Request - Applicants request a one month extension of time.  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) ____	<input type="checkbox"/> After Allowance Communication to Group  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		The Commissioner is authorized to charge the one (1) month extension fee (\$55) and any other fees due to make this response timely and complete to Applicants' attorneys' Deposit Account No. 20-0782/TVG/WGATE 5-14.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Eamon J. Wall, Reg. No. 39,414 MOSER, PATTERSON & SHERIDAN, LLP
Signature	<i>E. J. Wall</i>
Date	6/2/04

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or printed name	LAURA E. CRATER		
Signature	<i>Laura E. Crater</i>	Date	6/2/04

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